

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D. E.	7157	1-10-50
O.I.P.E. CLASSIFIER			1-10-50
FORMALITY REVIEW			1-10-50
RESPONSE FORMALITY REVIEW			1-10-50

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
1	1-10-50
2	1-10-50
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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